FORM B

APPLICATION FOR CANDIDATURE AS A MEMBER OF THE SUPERVISORY BOARD

To the Federation President of:

The undersigned		
Born in		State/Nation
ON	Month/DD/YYYY	
Residing in:		
Postal Code		
Address:	Number	Street
Cell Number	Country Code	Number
Email		

PRESENTS

DECLARES

under your own personal responsibility:

and use of false documents

- Not to be banned or incapacitated, not to have been declared bankrupt even in the past and not to have been sentenced to a penalty involving the banning, even temporary, from public offices or the inability to exercise managerial offices;
- Not to be in a state of bankruptcy or proceedings for the declaration of a state of bankruptcy;
- Not to have received criminal convictions and not to be the recipient of measures concerning the application of preventive measures, civil decisions, and administrative measures registered in the criminal record.
- To have the following requirements:
 - Degree in economics and/or law

- Experience gained in the field of economic and financial management and consultancy concerning non-profit associations
- Knowledge of the Italian language
- To undertake to remove the causes of incompatibility for the role covered in the Federation, the Union, the Mornese Onlus Association, or towards the Supervisory Body within the deadline established by the Electoral Regulations.
- That he has not already held the same post for two consecutive terms in the Confederation
- To have received the information drafted by the World Confederation pursuant to art. 13 of the EU Regulation n. 2016/679

•	That in light of the information received:
	\square I give my consent \square I DO NOT give my consent to the processing of my personal data, including those considered particular categories of data.
	□ I give my consent □ I DO NOT consent to disclose my personal data to public bodies and private companies for the purposes indicated in the information.
	\square I give my consent \square I DO NOT give my consent to the processing of the particular categories of my personal data as indicated in the above information.
Date .	Signature

Attach to this:

- Curriculum vitae duly signed, indicating the qualifications and illustrating the professional and associative experiences.
- Photostatic copy of a valid personal identity document